

mammograms. We don't mandate that you have a mammogram at age 40. What we say is discuss this with your doctor. But if your doctor says you need one, you are going to get one.

Studies have found mammogram screening decreases breast cancer among women by over 40 percent. Regular Pap smears reduce cervical cancer by 40 percent. This year, over 4,000 women will die of cervical cancer.

My amendment does focus on women's health needs. Keeping a woman healthy not only impacts her own life but that of her family. It impacts her ability to care for her child or an aging parent.

Early detection saves money by treating diseases early. Screening tests for breast and cervical cancer cost about \$150, but the treating of advanced breast cancer is over \$10,000 and can even go much higher. The treating of early stages of cervical cancer is \$13,000 and can go much higher.

My amendment also leaves the decision of which preventive services a patient will use between the doctor and the patient. The health reform debate is focused on what you should have when. We agree. Decisions should be made in doctors' offices, not in the office of a Member of Congress or the office of an insurance executive. The decision about what is medically appropriate and medically necessary is between a woman and her doctor.

The authors of the bill have done a very good job in protecting women in many areas. This actually refines and improves this particular issue. That is why I support the overall health reform bill providing universal access to health care for over 90 percent of the American people, ending those punitive practices of the insurance companies, stabilizing and strengthening Medicare, and improving quality in public health by using innovation and preventive services and quality. We can pass a health reform bill.

I conclude by saying that we will end the confusion about what is needed in the area of preventive health services for women when our coverage is often skimpy and spartan. We want to make sure what we do enables us to have access to these comprehensive services.

I hope this amendment is adopted unanimously. I believe good people on both sides of the aisle will believe in its underlying premise: that early detection and screening save lives and save money.

Often those things unique to women have not been included in health care reform. Today we guarantee it and we assure it and we make it affordable by dealing with copayments and deductibles in a way CBO believes is fiscally achievable. In the long run, I think by doing this it will mean a lot to families, and it will mean a lot to the Federal budget.

Mr. President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Montana.

Mr. BAUCUS. Mr. President, before I give a statement on the bill, I wish to

compliment the Senator from Maryland for standing up for and essentially helping the health care of women. As she has pointed out, women are discriminated against today in America in various ways. Her amendment addresses some of that discrimination. I very much appreciate that. I know all women in the country do. I do, too. I have a mom. I have sisters. I have women in my family, and I very much care.

I don't know if she made this point, but about 80 percent of health care decisions made for families are made by women. It is all the more important women are not discriminated against, partly because they make so many decisions that affect health care for Americans, but second, women themselves are often discriminated against. Some States have gender ratings which discriminate against women. In other States a preexisting condition is a factor that discriminates against women.

I thank the Senator from Maryland. She has hit the nail on the head. It is another reason this health care reform is going to mean so much for so many Americans. I personally very much thank the Senator from Maryland.

In the Presidential campaign of 1912, Theodore Roosevelt's platform said:

We pledge ourselves to work unceasingly in State and Nation for . . . the protection of home life against the hazards of sickness . . . through the adoption of a system of social insurance adapted to American use.

Today, nearly a century later, we are closer than ever to enacting meaningful health care reform.

As in Teddy Roosevelt's time, we seek protection against the hazards of sickness. Of necessity we seek a system uniquely adapted to American use. And recognizing the daunting task still ahead of us, we pledge ourselves to work unceasingly to get the job done.

In the years since Teddy Roosevelt, some of our Nation's greatest leaders signed up for this job. But at the same time, we have never faced a greater need to get the job done than we do today.

Why is that? Basically because health care costs are skyrocketing out of control. Every day American businesses are forced to cut benefits for their workers. Why? To remain competitive in the global marketplace. Every 30 seconds another American files for medical bankruptcy. Just think of that. Every 30 seconds another American files for medical bankruptcy. Every year, about 1.5 million families lose their homes because of health care costs. Our system is in crisis.

We have a historic need and we have a historic opportunity. We have an opportunity to enact groundbreaking reform that will finally rein in the growth of health care costs and help bring financial stability back to American families and businesses.

Unfortunately, there are some who stand in the way. Unfortunately, there are some who are spreading misinformation about how health care re-

form will work. On this very floor I have heard arguments that health care reform is about the government trying to take over health care. That is false.

The truth is, health care reform is about allowing patients and doctors to take back control of health care. We need to allow patients and their doctors together to take back control from the big insurance companies.

Our plan would not increase the government's commitment to health care. But don't just take my word for it. The nonpartisan Congressional Budget Office says:

[D]uring the decade following the 10-year budget window, the increases and decreases in the federal budgetary commitment to health care stemming from this legislation would roughly balance out, so that there would be no significant change in that commitment.

That is right, health care reform will not increase the Federal Government's budgetary commitment to health care.

I have also heard it argued that health care reform will increase the budget deficit. That, too, is false—plainly, patently false.

The bipartisan Congressional Budget Office says our plan would reduce the Federal deficit by \$130 billion within the first 10 years—reduce the deficit in the first 10 years. That trend would continue, the CBO says, over the next decade. During the next decade, CBO says our bill would reduce the deficit roughly \$450 billion. That is nearly one-half trillion dollars in deficit reduction, according to the Congressional Budget Office, in the second 10 years.

I have also heard it argued that health care reform will raise taxes. That, too, is false. In fact, health care reform will provide billions of dollars in tax relief to help American families and small businesses afford quality health insurance—tax cuts.

The Joint Tax Committee—again bipartisan and which serves both the House and the Senate—tells us, for example, that our bill would provide \$40 billion in the tax cuts in the year 2017 alone—\$40 billion in tax cuts in the year 2017. The average affected taxpayer will get a tax cut of nearly \$450. The average affected taxpayer with an income under \$75,000 in 2017 will get a tax cut of more than \$1,300.

Let me repeat that. The average affected taxpayer with income under \$75,000 in 2017 will get a tax cut of more than \$1,300. They will also get a tax cut in earlier years, but it ramps up to that amount in 2017.

In the same vein, I have heard claims that health care reform will result in an increase in higher costs for Americans. That, too, is false.

Health care reform will not result in higher costs for Americans. Health care reform is fundamentally about lowering health care costs and making quality health care affordable for all Americans. Lowering costs is what health care reform is designed to do, lowering costs; and it will achieve this objective. How? In many ways.